



HOWARD COUNTY POLICE DEPARTMENT **YOUTH ADVISORY COUNCIL** ***2018-2019 Membership Application***

What is the Youth Advisory Council?

The Youth Advisory Council was established in order to provide Howard County youth with a safe and engaging environment to interact with their peers and their local police officers. Through this program, youth will not only learn about law enforcement, but will have an opportunity to give feedback and ideas to the Howard County Police Department. Members will meet monthly with ranking members of the department to have open discussions and develop strategies on how to enhance police/youth relations.

Who can join?

- ❖ 8th through 12th grade students living in Howard County

When & Where?

- ❖ YAC meets on the second Monday of every month at Howard Community College

Benefits of joining

- ❖ Advise the police department on youth concerns and other issues
- ❖ Earn student service hours
- ❖ Be a positive agent of change in your community, school, or place of worship
- ❖ Attend free educational and social field trips
- ❖ Gain and strengthen life skills such as leadership, public speaking, and social skills
- ❖ Receive a meal during each meeting

How to apply

The membership application is available online at www.hcpd.org under "Youth Programs," by calling 410-313-2207, or by emailing HCPD-YAC@howardcountymd.gov. Applications are also available by contacting the School Resource Officer in each public high school, or the HCPD Youth Liaison at 410-313-0275.

Questions should be directed to PFC W. Harris, HCPD Youth Liaison, at 410-313-0275.

HOWARD COUNTY POLICE YOUTH ADVISORY COUNCIL

2018-2019 Membership Application

APPLICANT INFORMATION

Name:		
Date of birth:	Email:	Cell Phone:
Current address:		
City:	State:	ZIP Code:
Driver's License or State issued ID card number:		License State/Country:
Name of School:		Current Grade:

OPTIONAL

Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>		
Race/Ethnicity: White (Non-Hispanic) <input type="checkbox"/> Black/African American (Non-Hispanic) <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/>		
Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> _____		

PARENT/GUARDIAN (IF UNDER 18 YEARS OLD)

Name:		Email:
Current address:		
City:	State:	Zip Code:
Home Phone:	Cell Phone:	Relationship:

QUESTIONS

(PLEASE ANSWER IN NO MORE THAN 150 WORDS)

<p>1.) Please describe any current youth organizations and/or other out-of-school commitments, including extracurricular activities:</p>	
<p>2.) Please list any previous volunteer experience or leadership roles you have had in your school or community:</p>	
<p>3.) Briefly explain why you would like to participate in the Youth Advisory Council:</p>	

4.) If you could make one change in your community, what would it be?	
5.) What problems or issues currently facing your community are most important to you?	
6.) Being a member of the Youth Advisory Council requires attendance to monthly meetings. Do you have the ability to commit to this activity?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7.) Meetings will take place at Howard Community College. Will transportation be an issue for you?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	<i>If yes, briefly explain why.</i>
SIGNATURES/CONSENT TO BACKGROUND CHECK	
<p><i>Applicant over 18:</i> I, _____, hereby authorize the Howard County Police Department to investigate my background, for purposes of evaluating whether I am qualified for the position for which I am applying and truthful in my application. I understand information gathered during the background check will remain confidential.</p> <p style="text-align: center;">or</p> <p><i>Applicant under 18:</i> I hereby authorize the Howard County Police Department to investigate my child, _____'s background, for purposes of evaluating whether he/she is qualified for the position for which he/she is applying and truthful in his/her application. I understand information gathered during the background check will remain confidential.</p>	
Signature of applicant (required):	Date:
Signature of Parent/Guardian (required if under 18):	Date:

If you require additional space to complete any of the above questions, please attach a page and indicate which number question you are continuing. Please make sure that your name is on each additional page.

Thank you for your time and interest!

APPLICATIONS CAN BE RECEIVED BY:

Email: HCPD-YAC@howardcountymd.gov

Mail or hand-deliver to:

Howard County Police Department-Community Outreach Section
10741 Little Patuxent Pkwy
Columbia, MD 21044
ATTN: Youth Advisory Council